

The invasive mole "chorioadenoma destruens"

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Invasive mole or chorioadenoma destruens represent approximately 15% of all gestational trophoblastic tumors. It is a tumor characterized by a myometrial invasion either by direct extension (in the uterus and towards the pelvis) or by vascular dissemination to the brain and the lung. It follows a hydatiform mole that is most often complete, the diagnosis of which is usually evoked in the medical follow-up suites, or there is a stagnation or re-ascension of the β HCG level. The most common symptom is metrorrhagia. Its evolution is most often favorable, but can cause death by hemorrhage or perforation.

We present a clinical case of invasive mole infiltrating the uterine wall completely with rupture of the latter and associated hemoperitoneum.

It is a 44-year-old multiplier, which has undergone a suction curettage for hydatiform mole and whose monitoring revealed a re-ascension after an initial regression of the rate of β HCG. The patient complained of pelvic pain a few days before her readmission. Ultrasound discovers a haemoperitoneum and an intrauterine image. Operated as an emergency, laparotomy detects in addition to an important hemoperitoneum a posterior effraction of the uterine wall with exit of the trophoblastic tissue in appearance of bunch of grapes. A total hysterectomy with bilateral anexectomy was performed for this patient.

Keywords : Gestational trophoblastic tumor, invasive mole, myometrial invasion,

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